HIMS AME Checklist - Drug and Alcohol Monitoring Recertification

(Updated 08/30/17)

Airman Name PI#			
Instructions to the HIMS AME:			
 Address the following items based on your in-office exam and documentation review; Submit this Checklist (it must be signed and dated by the HIMS AME); AND Include supporting documentation reviewed to complete this checklist (including within 14 days to: 	g your HI	MS AME	eport)
Federal Aviation Administration Civil Aerospace Medical Institute, Bldg. 13 Aerospace Medical Certification Division, AAM-313 PO Box 25082 Oklahoma City, OK 73125-9867			
I reviewed the airman's HIMS Authorization Letter dated: (Date of Authorization letter)			
 HIMS AME FACE-TO-FACE, IN OFFICE EVALUATION: Required <u>EVERY 6 months for ALL CLASSE</u> Any concerns that the airman is not successfully engaged in a continued abstinence-based recovery prog 	ram _	No	Yes
 or is not working a good program based on your clinical interview/evaluation and review of reports? Interval evaluations (every 3 months or as required by Authorization Letter) were unfavorable? Any evidence or concern the airman has not remained abstinent? Any positive drug or alcohol tests since last HIMS evaluation? 			
Any evidence of noncompliance or concern the airman is not working a good recovery program Any NEW condition(s) that would require Special Issuance? (Do not include any new CACI qualified condition.)	١ [
2. TREATING PSYCHIATRIST REPORT or HIMS PSYCHIATRIST REPORT: Required EVERY 12 mont for ALL CLASSES unless a different time interval is specifically stated in the Authorization Letter.	hs Not	Yes	No
Report(s) is/are favorable (no anticipated or interim treatment changes) The psychiatrist recommends no additional treatment or monitoring	Due	163	NO
Items 3 - 5: The AME should review. Do not submit these items (3-5) to the FAA unless concerns are	noted.		
3. AFTERCARE COUNSELOR REPORTS : For 1 st and 2 nd class: Required every 3 months; 3 rd class: Per Authorization Letter.	N/A	Yes	No
Show continued participation and abstinence-based sobriety?			
 4. CHIEF PILOT REPORT(S): Required monthly for commercial pilots holding first- or second-class certificates (N/A for third-class): Report(s) is/are favorable? 	N/A	Yes	No
5. PEER PILOT REPORTS: Required monthly for commercial pilots holding first- or second-class certificates (N/A for third-class):	N/A	Yes	No
Report(s) is/are favorable with continued total abstinence?			
ADDITIONAL REPORTS: Required ONLY when specified by the Authorization letter HIMS related (AA attendance, therapy reports, etc.) are favorable and meet authorization requirements Reports required for other non-HIMS conditions all meet Authorization requirements	N/A	Yes	No
7. I have no other concerns about this airman and recommend re-certification for Special Issuance		Yes	No
HIMS AME Signature Date of	Evaluation	on	

If ALL items fall into the clear column, the AME may issue with the time limitation specified in the Authorization letter. If ANY SINGLE ITEM falls into the SHADED COLUMN, the AME MUST DEFER or contact the FAA for guidance AND EXPLAIN in the HIMS evaluation report.